New York State

WHAT YOU SHOULD KNOW ABOUT YOUR RIGHTS AND RESPONSIBILITIES

(When Applying For or Receiving Benefits)

BOOK 1

Also See

BOOK 2 (LDSS-4148B)
"WHAT YOU SHOULD KNOW ABOUT SOCIAL SERVICES PROGRAMS

and

BOOK 3 (LDSS-4148C)
"WHAT YOU SHOULD KNOW IF YOU HAVE AN EMERGENCY"

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TABLE OF CONTENTS

PAGE

INTRODUCTION 2

YOUR RIGHTS

1. Application Rights 3
2. Nondiscrimination Rights 4
3. Personal Privacy Rights 4
4. Your Right To Look At Your Records 6
5 Conferences, Support Pass-Through Payment Desk Reviews And Fair Hearings 6
6. Employment Rights 9
7. Rights Of Children And Fathers When Paternity Is Established In Court 10
8. Rights Regarding Paternity And Child Support Legal Actions and Representation 10
9 Rights Regarding Child Care 10
10. Support Pass-Through Payments-Temporary Assistance 11
11. Your Right To Ask For Restricted Payment For Temporary Assistance 12
12. Your Rights If You Are Suspected Of Fraud 12
13. Your Right To Register To Vote 12

YOUR RESPONSIBILITIES

1. General Responsibilities 12
2. Responsibility To Provide Truthful And Accurate Information 13
3. Responsibility To Provide Proof 14
4. Responsibility To Enroll in the Automated Finger Imaging System 15
5. Responsibility To Report Changes 16
6. Responsibilities Regarding Your Common Benefit Identification Card 18
7. Responsibility To Access Your Food Stamp Benefits 18
8. Responsibility To Repay Your Benefit Overpayments 18
9. Employment Responsibilities 19
10. Responsibilities Regarding Child Care 21
11. Responsibilities Regarding Child And Spousal Support 21
12. Responsibility To Complete The Alcohol And Substance Abuse Screening For TA 23
13. Responsibility To Participate In Substance Abuse Rehabilitation For Medical Assistance 23
14. Responsibilities Regarding The Use Of Medical Assistance Providers 23
15. Recertification Responsibilities 24
16. Minor Parents Responsibilities Applying For Or Getting Temporary Assistance 24
17. Your Responsibilities Regarding Temporary Housing If You Are Homeless 24
18. Your Responsibility To Apply For Supplemental Social Security 25

PLEASE NOTE*:*

This book tells you about many of your rights and responsibilities when you are applying for or getting social services benefits or care.

It is intended to give you a general understanding of rights and responsibilities contained in State and federal laws, rules and regulations. Please ask for further information if you have specific questions.

INTRODUCTION

This book (**LDSS-4148A**: "What You Should Know About Your Rights and Responsibilities") is one of three that answers most questions about the assistance we can give you. This book tells you about your rights and responsibilities when you apply and when you receive assistance.

The second book (**LDSS-4148B**: "What You Should Know About Social Services Programs") gives specific information about each program, and the third book (**LDSS-4148C**: "What You Should Know If You Have An Emergency) tells you what to do if you have an emergency.

Throughout these books we call the public assistance programs "Temporary Assistance". (Officially they are called "Family Assistance" and "Safety Net Assistance".) The reason for the word "Temporary" is to stress that these programs are meant to assist you only until you can fully support yourself and your family.

These books also refer to the Medical Assistance. Medical Assistance includes Child Health Plus A coverage for children and Medicaid coverage for adults.

These books also refer to Services. Services include such things as child care, foster care, child welfare, adoption, and others.

YOUR RIGHTS

1. Application Rights

You have the right to:

- Be told about the programs and help you can get.
- Be told what you need to do to get these programs.
- Apply for these programs.
- Get an Application when you ask for one.

NOTE: Applications and their accompanying publications are available in Spanish.

NOTA: Las solicitudes y las publicaciones pertinentes a esas solicitudes estan disponibles en Espanol.

- Turn in (file) the Application the same day you get it.

NOTE: A Food Stamp Benefits Application must be accepted if you have filled in at least your name, address (if you have one) and signature. This is important because the amount of your Food Stamp Benefits is figured from the day you turn in your Food Stamp Benefits Application. You could get more Food Stamp Benefits if you turn in your application the same day you get it. Please note, however, that you will have to fill out the rest of the application to see if you can get Food Stamp Benefits.

- Mail in your application if you are applying only for child care services.
- Have an interview
  - -- For Temporary Assistance, this interview should be within seven working days.
  - -- For Medical Assistance (Medicaid/Child Health Plus A) there is no specific time frame within which you or your representative must be interviewed. However, you must be interviewed before eligibility can be established.
  - -- For Food Stamp Benefits, the interview must be scheduled timely in order to ensure a determination of eligibility and benefit issuance within 30 days of application filing.

NOTE: If you are applying for assistance other than Medical Assistance, and you tell us that you have an *emergency today,* we must interview you about that emergency today. We must also tell you in writing today about our decision on your emergency.

- Bring someone to your interview to interpret for you. If you need an interpreter, the district will arrange for one. You cannot be denied access to services because you are not fluent in English.
- Have the same access to social services programs, if you have a disability, as someone who does not have a disability.
- Be told, within 30 days of the date you turned in (filed) your Application for **Family Assistance or Services**, if your Application is approved or denied; be told within 45 days of the date you turned in (filed) your Application for **Safety Net Assistance** if your Application is approved or denied.
- Get help within 30 days of the date of your Application, if your Application is approved.
- When your Application for Medical Assistance, including your interview, is completed, you will be notified if you are eligible for Medical Assistance or if your Application is denied. The time frame for you to be notified varies:
  - -- Pregnant women and young children must be told within 30 days of filing the Application;
  - -- Disabled persons must be told within 90 days of filing the Application and
  - -- All other persons must be told within 45 days of filing the Application
- Get a written notice telling you if your Application is approved or denied
  - -- If your Application is approved, this notice will tell you what benefits you will get.
  - -- If your Application is denied, this notice will tell you why and what you should do if you disagree or do not understand this decision.

NOTE: If your application for Temporary Assistance is approved and you are an adult with no children, your category of Temporary Assistance will generally be Safety Net Assistance.

People in Safety Net Assistance cases will not get recurring Temporary Assistance for any period prior to 45 days from the date of application. People in the Safety Net Assistance Category may be able to get help to meet emergencies during the 45 day period that they cannot get recurring benefits. (See DSS-4148C: “What You Should Know If You Have An Emergency”.)

People in the Safety Net Assistance category who are eligible for Food Stamp Benefits do not have to wait any longer for those benefits than any other applicant.

2. NONDISCRIMINATION RIGHTS

Discrimination by the New York State Office of Temporary and Disability Assistance (OTDA), by the New York State Department of Health, by the Office of Children and Family Services or by your local department of social services based on race, religion, ethnic background, marital status, disability, sex, national origin, political belief or age is **illegal**.

If you think you have been discriminated against in a Temporary Assistance Program or that your case has been handled improperly due to some type of discrimination, you can complain by calling or writing to the:

Bureau of Equal Opportunity Development
New York State Office of Minority Program Development
New York State Office of Temporary and Disability Assistance
40 North Pearl Street, 16 D
Albany, New York 12243-0001
(518) 473-8555

You can also call or write to one of the regional offices of the New York State Division of Human Rights, which can be found in the Government pages of the telephone book.

Some cities and counties in New York State also have human rights commissions that investigate discrimination complaints. Check your telephone book for a listing.

If you think you have been discriminated against in the **Food Stamp Benefits Program**, you can also complain by writing to the:

Administrator
Food and Nutrition Service
3101 Park Center Drive
Alexandria, Virginia 22302

Your discrimination complaint will be investigated, and you will be told in writing of the findings.

If you think you have been discriminated against on the basis of disability, you can also complain by writing to:

Disability Rights Section
P.O. Box 66738
Washington, D. C. 20035-6738

Your discrimination complaint will be investigated, and you will be told in writing of the findings.

If you think you have been discriminated against in the Medical Assistance Program, you can complain by calling or writing to:

Human Resources Group
New York State Department of Health
2295 Corning Tower
Albany, NY 12237
(518) 473-3394

3. PERSONAL PRIVACY RIGHTS

The New York State Personal Privacy Protection Law and the federal Privacy Act require the New York State Office of Temporary and Disability Assistance), the Office of Children and Family Services and the New York State Department of Health to tell you what it does with the information, including Social Security Numbers, that you give the State (or, in certain instances, to your local department of social services) about you and your family. The Privacy Act statement is on your application form.

This information, including your Social Security Number, is used to find out which programs can help you, and is also used to find out how much money and other help you can get. Following are some other uses for the information:

- Upon request of a law enforcement officer in certain circumstances, a local department of social services (DSS) must provide the address of Temporary Assistance and Food Stamp Benefits recipients.
- In some cases, information you supply is used to form jury pools.
- In some cases, information is shared with the Immigration and Naturalization Service (INS).
- Information is used for child support purposes.
- Information is shared with other states and agencies that provide similar assistance, in order to prevent duplication and fraud.

Whenever you are asked for information, you must give it so that it can be used to see if you can get money or other help. The parts of law that oblige New York State Office of Temporary and Disability Assistance, New York State Department of Health and local departments of social services to get information about you and to verify this information are Sections 21, 132, 134-a and 366-a of the Social Services Law and Section 1137 of the Federal Social Security Act.

To make sure you are getting the money or other help that you and your family are legally allowed to get, other people may be asked to confirm and add to the information you have already given us. For example:

- To find out if you are or were working, and, if so, how much money you made, your name and Social Security Number are sent to the New York State Department of Taxation and Finance, and also to known employers. In some cases your name and Social Security Number may be sent to government agencies in other states to find out if you worked or got money or other help in those states.

NOTE:	If you are applying for or getting Temporary Assistance or Medical Assistance, we may give your children's Social Security Numbers to their non-custodial parent in order to enroll the children in their non-custodial parent's health insurance coverage and, if necessary, to begin child support enforcement services.

- The Unemployment Insurance Division in New York State and similar offices in other states are asked if you are or were getting unemployment benefits.
- Banks may be asked to see if you have a bank account(s), or confirm that you have one and how much money is in your account(s).
- Schools may be asked to confirm that your children go there.
- The New York State Department of Motor Vehicles may be asked if you own a car.
- The Social Security Administration is asked for employment information and to see if you get pension or disability benefits.

Personal privacy rights also apply to all Medical Assistance and Services applicants and participants.

Besides using the information you give us in this way, the New York State Office of Temporary and Disability Assistance (OTDA) also uses the information for program planning and management and to make sure local departments of social services are doing the best job they can **("quality control")**. This information is kept by the Deputy Commissioner, Division of Information Technology (DoIT), Office of Temporary and Disability Assistance, 40 North Pearl Street, Albany, N. Y. 12243-0001

The New York State Office of Temporary and Disability Assistance (OTDA) is also doing research to learn whether our programs are effective in helping Temporary Assistance applicants and recipients find and keep jobs. This research is very important. It helps us improve services that affect thousands of Temporary Assistance clients like you.

In order to carry out this research, it is necessary to track the wages of samples of temporary assistance applicants and recipients for up to 10 years using the State's Wage Reporting System. This wage information is used only for research purposes. **It does not affect your eligibility for Temporary Assistance in any way**. All the wage information collected for the research is kept strictly confidential. Only the people doing the research see the wage information and they do not have access to the names of individual applicants and participants. If you are included in the research, you will never be named in any report and no information about your wages will ever be given out. If you object to the use of your wage reporting records, you can request that they be excluded from the research by writing to:

New York State Office of Temporary and Disability Assistance
Office of Program Evaluation
40 North Pearl Street
Albany, New York 12243

4. YOUR RIGHT TO LOOK AT YOUR RECORDS

Once you apply for money or other help, **two** kinds of records are kept about your case. Usually, you have the right to look at these records.

You may **not** be able to look at all of your records. For example, you may not be able to look at all or part of child support, adoption, foster care, child protective and preventive records. Your worker can explain these rules to you.

CASE RECORD -The first type of record, called your **case record**, is kept at your local department of social services and has all the papers about your case. Your case record may include your application, copies of birth certificates, pay stubs, notes taken by your worker during your interviews and any other information about your case.

Usually, you have the right to look at your case record during working hours. However, you must ask your local department of social services ahead of time in order to do this. You can ask for copies of the papers that are in your case record, but you may have to pay for copying these papers. If the papers will be used at or are needed for a Fair Hearing, copies of them must be given to you for free.

COMPUTER RECORDS -The other type of record is kept in a computer maintained by the New York State Office of Temporary and Disability Assistance. The information about your case is put in this State computer record by your local department of social services. In most cases, you also have the right to see your computer records kept by the State.

For copies of most **computer records**, write to:

Director, Office of Communications
New York State Office of Temporary and Disability Assistance
40 North Pearl Street
Albany, N. Y. 12243-0001

For copies of **foster care**, **child protective, preventive case** and **child care** computer records, write to:

Director, Child Care Review Service
New York State Office of Children and Family Services
Capital View Office Park
52 Washington Street
Rensselaer, New York 12144

When you write for copies of your computer records, the Personal Privacy Protection Law requires that New York State Office of Temporary and Disability Assistance, within five working days of when they get your letter, must:

- Send you your records **OR**
- Tell you why they will not give you your records **OR**
- Tell you they have your request and they will determine if you are allowed to get your records.

5. CONFERENCES, SUPPORT PASS-THROUGH PAYMENT DESK REVIEWS AND FAIR HEARINGS

If you think any decision about your case is wrong, or you do not understand any decision, talk to your worker right away. If you still disagree or do not understand, you have the right to a **Conference** and a **Fair Hearing**.

CONFERENCE - A Conference is when you meet with someone other than the person who made the decision about your case. At the Conference this person will review that decision. Sometimes a Conference is the fastest way to solve any problems you may have. We encourage you to ask for one **even if you have requested a Fair Hearing.** However, Conferences are voluntary, and you can request a Fair Hearing even if you do not request a Conference. To ask for a Conference, call or write your local department of social services.

A CONFERENCE IS NOT A FAIR HEARING. If you are told that your case is being closed, or that the money or other help you are getting will be less, and the problem is not settled through a Conference, you must ask for a **Fair Hearing** to keep the money or other help you are getting from being stopped or reduced.

NOTE: A request for a Conference is not a request for a Fair Hearing. If you want a Fair Hearing, you must request one.

SUPPORT PASS-THROUGH PAYMENT DESK REVIEW -If you think you did not receive a support pass-through payment **(See "Your Rights", Section 10 of this Book, "Support Pass-Through Payments-Temporary Assistance")** that you should have, or believe that you received less than you should have, contact your worker or the support collection unit in your local department of social services. If you are not satisfied with the information you receive from your worker or from the support collection unit, you may request a support pass-through payment desk review.

In a **support pass-through payment desk review**, the New York State Office of Temporary and Disability Assistance reviews the support payments received for your household and pass-through payments issued to you, to see if you were underpaid. You will be able to give information to the desk review staff to show why you believe a mistake was made, and you may ask for help in getting information to prove that you are owed more money.

You should request a support pass-through desk review soon after you learn that a mistake may have been made, because a support pass-through payment desk review only covers payments for the calendar year of your request and the year before the year of your request. To ask for a support pass-through payment desk review, you may call: **l-800-342-3009 and press "3" for child support,** or you may write the Office of Administrative Fair Hearings. **The address appears on page 9 of this book**.

Fair Hearing - A Fair Hearing is a chance for you to tell an Administrative Law Judge from the New York State Office of Temporary and Disability Assistance why you think the decision about your case was wrong. The State will then issue a written decision which will state whether the local department of social services decision was right or wrong. The written decision may order the local department of social services to correct your case.

Some Reasons Why You Might Ask For A Fair Hearing

- Your Application for Temporary Assistance, Medical Assistance, Food Stamp Benefits, Services, Child Care or Home Energy Assistance Program - HEAP is denied, and you do not agree with this decision.
- You applied for Temporary Assistance, Food Stamp Benefits, Services or Home Energy Assistance Program - HEAP and more than 30 days have passed. You have not been told yet if your Application has been approved or denied. For some adults applying for Temporary Assistance, the decision may take up to 45 days.
- You believe that your Temporary Assistance, Medical Assistance, Services or Home Energy Assistance Program - HEAP are inadequate.
- You applied for Medical Assistance and have not received a notice telling you if your Application has been approved or denied.
  - If you are pregnant or applying for a young child you should get a notice within 30 days.
  - If you are applying as a disabled person, your eligibility determination may take 90 days.
  - Everyone else is notified within 45 days.
- You are told that you are able to work (employable), and you do not agree with this.
- You think the amount of your Temporary Assistance or Food Stamp Benefits or Child Care Benefits is wrong.
- You are getting Medical Assistance or Child Care benefits, but you have to pay part of the cost. You think your share is too much.
- Medical Assistance is paying for a service and you have been told that your service is being reduced or discontinued. You do not agree with this.
- You have applied for a Medical Assistance waiver program and have been denied. You do not agree with this.
- At a Fair Hearing you will have a chance to explain why you think the decision is wrong. You have been told that, due to your abuse of Medical Assistance, you must get your medical care from one main provider (Recipient Restriction Program). You do not agree with this decision. **(See "Your Responsibilities ", Section 14 of this Book, "Responsibilities Regarding The Use Of Medical Assistance Providers".)**
- You are getting Temporary Assistance, Medical Assistance, Food Stamp Benefits or Services, and you have been told that your case is being closed. You do not agree with this decision.
- You asked for expunged EBT (Electronic Benefit Transfer) benefits to be reissued to you, and they were not reissued.
- You asked for an adjustment (correction) of your Food Stamp Benefit EBT (Electronic Benefit Transfer) account and your request was denied.
- Your Food Stamp Benefit EBT (Electronic Benefit Transfer) account was adjusted (corrected). You do not agree with this.
- Your local department of social services uses part of your Temporary Assistance to pay directly for your bills such as heat, rent, utilities (restricted payments). You do not agree with this.
- You ask for more assistance or services for a special need and you are told you cannot get it. You do not agree with this.
- You are getting Temporary Assistance or Food Stamp Benefits or Child Care benefits each month and you are told that you will be getting less. You do not agree with this.
- You are getting Medical Assistance or Child benefits, but you have to pay part of the cost. You think your share is too much.
- Medical Assistance is paying for a service and you have been told that your service is being reduced or discontinued. You do not agree with this.
- You have applied for a Medical Assistance waiver program and have been denied. You do not agree with this.

At a fair Hearing you will have a chance to explain why you think the decision is wrong.

TIME LIMITS TO ASK FOR A FAIR HEARING - If you want to ask for a Fair Hearing for Temporary Assistance, Medical Assistance, Food Stamp Benefits or Services, call **right away** because **there are time limits**. If you wait too long, you may not be able to get a Fair Hearing.

NOTE:	If your situation is very serious, the New York State Office of Temporary and Disability Assistance will set up a fair hearing for you as soon as possible. When you call or write for a fair hearing, be sure to explain that your situation is very serious.

IF YOU DO GET A NOTICE ABOUT YOUR CASE, and you want to ask for a Fair Hearing, the Notice will tell you how much time you have to ask for the Fair Hearing. **Be sure to read all of the notice carefully.**

If your notice tells you that your **Temporary Assistance or Medical Assistance or Services** has been denied, will be stopped or will be reduced, you may ask for a Fair Hearing within **60** days from the date of the notice.

If your notice tells you that your **Food Stamp Benefits** have been denied, will be stopped or will be reduced, you may ask for a Fair Hearing within **90** days from the date of the notice. You may ask for a Fair Hearing if you think you are not getting enough Food Stamp Benefits at anytime within the certification period.

IF YOU DO NOT GET A NOTICE ABOUT YOUR CASE, and your money or other help is denied, stopped or reduced you can also ask for a Fair Hearing.

How To Ask For A Fair Hearing

IF YOU DO GET A NOTICE ABOUT YOUR CASE, and you want to ask for a Fair Hearing, the notice will tell you how. **Be sure to read all of the notice carefully.**

If you get a notice telling you that your money or other help will be stopped or reduced, and you ask for a Fair Hearing before the **effective date** on your notice, your money or other help will, in most instances, stay the same **("aid continuing")** until the Fair Hearing decision is made. If the notice was not sent before the effective date, and you ask for a Fair Hearing within **10** days of the **postmark date** of the notice, you also have the right to have your money or other help stay the same **("aid continuing")** until the Fair Hearing decision is made.

However, if you do get **"aid continuing"** and you lose the Fair Hearing, you will have to pay back any Temporary Assistance and/or Food Stamp Benefits, Medicaid and/or child care benefits received while you were waiting for the Fair Hearing decision.

If you **do not** want the money or other help you have been getting to stay the same until the Fair Hearing decision is made, you must tell this to the New York State Office of Temporary and Disability Assistance when you call or write for a Fair Hearing.

IF YOU DO NOT GET A NOTICE ABOUT YOUR CASE, and your money or other help is stopped or reduced, you can still ask for a Fair Hearing. At the same time that you ask for a Fair Hearing, you can ask that your money or other help be restored **("aid continuing")**.

However, if you do get **"aid continuing"** and you lose the Fair Hearing, you will have to pay back any Temporary Assistance and/or Food Stamp Benefits, and/or child care benefits received while you were waiting for the Fair Hearing decision If Medical Assistance was incorrectly paid due to your mistake, Medical Assistance may seek to recover the cost of the Medical Assistance paid.

What You Should Do For A Fair Hearing

The New York State Office of Temporary and Disability Assistance will send you a notice, which tells you when and where the Fair Hearing will be held.

To help you get ready for the Fair Hearing, you have the right to look at your case record and get free copies of the forms and papers which will be given to the Administrative Law Judge at the Fair Hearing. You can also get free copies of any other papers in your case record which you think you may need for the Fair Hearing. Usually, you can get these papers within a reasonable time before the hearing, or at the hearing at the latest. If you ask for any papers, and the local department of social services does not give them to you before or at the hearing, you should tell the Administrative Law Judge about it. For how to do this, see **Your Rights, Section 4 of this Book, "Your Right To Look At Your Records"**.

You can bring a lawyer, a relative or a friend to the Fair Hearing to help you explain why you think a decision about your case is wrong. If you cannot go to the Fair Hearing, you can send someone else in your place. If you are sending someone who is not a lawyer to the Fair Hearing, you should give this person a letter to give to the Administrative Law Judge. This letter should tell the Judge that this person is taking your place.

To help you explain at the Fair Hearing why you think the decision is wrong, you should also bring any witnesses who can help you and any information you have such as:

- **Pay stubs**
- **Bills**
- **Receipts**
- **Leases**
- **Doctor's Statements**

Someone from your local department of social services will also be at the Fair Hearing to explain the decision about your case. You or your representative will be able to question this person and present your side of the case. You or your representative will also be able to question any witnesses, whom you bring to help you.

If you think you need a lawyer to help you with your Fair Hearing, you may be able to get a lawyer at no cost to you by calling your local Legal Aid or Legal Services Office. For the names of other lawyers, call your local Bar Association.

NOTE:	If you ask, you will be able to get back the money you had to pay for public transportation, child care and other necessary expenses to go to the fair hearing. If no public transportation is available, you may be able to get back the money you had to pay for another type of transportation. If you are unable to use public transportation because of a medical problem, you may be able to get back the money you had to pay for another type of transportation. However, you may be asked to provide medical verification.

Telephone numbers for requesting a Fair Hearing are:

- **If you live in: New York City - (212) 417-6550**

NOTE:	For New York City emergency hearings only (212) 417-3614. Do not use this telephone number for anything except emergencies.

- **If you live in:** Cattaraugus, Chautauqua, Erie, Genesee, Niagara, Orleans or Wyoming County**:** (716) 852-4868
- **If you live in:** Allegheny, Chemung, Livingston, Monroe, Ontario, Schuyler, Seneca, Steuben, Wayne or Yates County: (716) 266-4868
- **If you live in:** Broome, Cayuga, Chenango, Cortland, Herkimer, Jefferson, Lewis, Madison, Oneida, Onondaga, Oswego, St. Lawrence, Tompkins or Tioga County: (315) 422-4868
- **If you live in:** Albany, Clinton, Columbia, Delaware, Dutchess, Essex, Franklin, Fulton, Greene, Hamilton, Montgomery, Orange, Otsego, Putnam, Rensselaer, Rockland, Saratoga, Schenectady, Schoharie, Sullivan, Ulster, Warren, Washington or Westchester County: (518) 474-8781
- **If you live in:** Nassau or Suffolk County: (516) 739-4868

Or

You can write to:

Office of Administrative Hearings
New York State Office of Temporary and Disability Assistance
P. O. Box 1930
Albany, New York 12201

There is a special Fair Hearing address and phone number for the **Home Energy Assistance Program (HEAP)**.

You may telephone **I-800-342-3334** to ask for a hearing relating to HEAP. **[Do not use this telephone number for non-HEAP hearings.]**

In addition you can write to:

Office of Administrative Hearings
Energy Hearings
New York State Office of Temporary and Disability Assistance
40 North Pearl Street
Albany, New York 12243-0001

6. EMPLOYMENT RIGHTS

For Temporary Assistance

If you do not agree that you are able to work, you should notify the social services official that you believe you should be exempt from participation in work activities. You will be notified of the social services official's determination regarding your claim. If the social services official disagrees with you, you may request a fair hearing to tell an Administrative Law Judge why you think you are not able to work.

If you do not agree with your work activity assignment or you think you are unable to perform the assignment due to health related limitations, you may request a conciliation conference. A conciliation conference is a meeting with staff from your local department of social services to talk about why you disagree with your work activity assignment. A person who is not directly responsible for your case will be present at the conference. This person will try to resolve any problems. If you request a conciliation conference, you are still expected to continue to comply with your work activity assignment. You may also request a fair hearing to tell an Administrative Law Judge why you do not agree with your assignment.

You should inform the social services official if you need help getting childcare or paying for work-related expenses such as transportation. If you are unable to locate necessary childcare for a child who is under thirteen years of age, the social services official will help you locate childcare.

For Food Stamps Benefits

If you do not agree that you are able to work, you should notify the social services official that you believe you should be exempt from participation in work activities. You will be notified of the social services official's determination regarding your claim. If the social services official disagrees with you, you may request a fair hearing to tell an Administrative Law Judge why you think you are not able to work.

You should inform the social services official if you need help getting childcare or paying for work-related expenses such as transportation. If you are unable to locate necessary childcare for a child who is under thirteen years of age, the social services official will help you locate childcare.

If you are required to participate in food stamp work activities you may be able to get up to $25 each month for certain work-related expenses. You also may be able to receive assistance with childcare cost.

For Medical Assistance

Medical Assistance has no employment requirements.

7. RIGHTS OF CHILDREN AND FATHERS WHEN PATERNITY IS ESTABLISHED IN COURT

When a court has established who is the father of a child, the father and the child each may have rights, as explained below:

A. The **child** may have the right to:
- Disability benefits if the father becomes disabled
- Death benefits if the father dies
- An inheritance when the father dies
- Child support payments until the age of 21

B. The **father** may have the right to:
- Get custody of the child
- Visit with the child
- Take part in any adoption or foster care plans for the child
- Disagree with any adoption or foster care placements of the child
- Inherit from the child

8. RIGHTS REGARDING PATERNITY AND CHILD SUPPORT LEGAL ACTIONS AND REPRESENTATION

You have the right to be told about any paternity or child support court actions involving you or your child, including the right to be informed of the time, date and place of such court actions. You have the right and may be required to appear in court at the time of any paternity or child support action involving you or your child.

If any paternity or child support actions are brought in court, your local department of social services will have a lawyer or other representative who will **only** try to prove your child's paternity and set up and enforce an order of child support. This lawyer or representative only represents the local department of social services and **not** you personally. This lawyer or representative **will not** handle any custody, visitation or other legal issues not related to child support.

Any information you give this lawyer or representative **may not** stay private. Any information indicating welfare fraud may be reported.

If you think you need a lawyer to help you, you may be able to get a lawyer at no cost to you by calling your local Legal Aid or Legal Services office. For the names of other lawyers, call your local Bar Association.

9. RIGHTS REGARDING CHILD CARE

Your **Temporary Assistance cannot be reduced or ended** because you are not participating in work activities **if** the reason you are not participating is because **you don't have appropriate, accessible, affordable and suitable child care for a child under the age of 13.**

You have the **right to receive information** about how to locate a child care provider. This information could be provided in a number of ways.

- Your worker can give you the name and telephone number of a Child Care Resource and Referral Program or other similar program which can help you find a child care provider; **or**
- Your worker can give you a list with the name; address and telephone numbers of child care providers.

You have the **right to choose** the child care provider for your child. This could be a provider who is licensed or registered or it could be a relative, a friend of the family or a trusted neighbor. If you choose someone who is not licensed or registered they will need to complete a child care enrollment for to see if they are eligible for payment.

If you are unable to find a child care provider on your own, your worker must provide you with **two choices** of child care providers. At least one of these choices must be a child care provider who is licensed or registered with the State of New York or with New York City Department of Health.

You have the **right to be excused from your work activity** if you have a child under 13 years of age and you are unable to find a child care provider that is **appropriate, accessible, affordable and suitable**. However, the time you are excused from your work activity will still count toward your 60-month limit of federally funded and cash Temporary Assistance.

- **Appropriate** means the provider is open for the hours and days needed for you to participate in your work activity, and is willing to care for your child(ren) including any special needs your child has.
- **Accessible** means that you are able to get to the provider by driving your own car or by public transportation and the provider is located within a **reasonable distance** from your home and work. Your worker must tell you what is considered a reasonable distance for your community.
- **Suitable** means the physical or mental condition of a legally exempt the provider or the physical condition of the legally exempt home would not be detrimental to the health or safety of your child(ren).
- **Affordable** means you have enough money to pay your share of the child care cost, if you are required to pay a share of the costs.

You have the **right to request a fair hearing to appeal the decision to reduce or end your Temporary Assistance** if you feel your worker made the wrong decision regarding your refusal to comply with your work activities due to a lack of child care.

10. SUPPORT PASS-THROUGH PAYMENTS - TEMPORARY ASSISTANCE

When you apply for Temporary Assistance, and for as long as you get Temporary Assistance, you turn over to your local department of social services your right to get any support payments owed to you or anyone else for whom you are applying for, or getting Temporary Assistance. The first $50.00 of current child support or current spousal support collected each month by your local department of social services will be paid to you ("pass-through" payment). This pass-through payment is not counted against your Temporary Assistance, but may reduce your Food Stamp Benefits. The pass-through payment cannot be more than $50.00 per month and cannot be more than the monthly amount that the court ordered the non-custodial parent to pay.

When your local department of social services receives current support for you, you will be sent a Monthly Report of Support Received. This monthly report tells you whether or not you will receive a pass-through payment, how much, and why. You should compare this report to your benefits receipts for that month.

parent pays the support in the month when it is due, and your local department of social services receives the support, you will be paid a pass-through payment.

If you have a question about your pass-through payments, you may ask your worker. Your worker will answer your question or direct you to a support worker for help. In New York City, you may call the Support Collection Unit.

If, after talking with your worker or your support worker, you need more help with your pass-through payment question, you may ask for a **support pass-through payment desk review**. This is a review by the New York State Office of Temporary and Disability Assistance (OTDA) of support payments received for your household and pass-through payments issued to you, to see if you were underpaid. You will be able to give information to the desk review staff, and you You will get the pass-through payment the month after your local department of social services receives current support payments for you. The pass-through payment is paid once a month.

A support payment is "current" if it is paid in the month when it is due. A support payment might be paid on time by the non-custodial parent but received late by your local department of social services. This might happen if an employer is taking the support money out of the non-custodial parent 's paycheck but sending it in late. Current support also might be received late if the non-custodial parent is making the support payment in another county or state and that office sends the payment in late. As long as the non-custodial may ask for help in getting information to prove that you are owed more money.

If you wish to ask for a support pass-through payment desk review of your support payments, you may call:

l-800-342-3009 and press “3” for child support.

or you may write the Office of Administrative Fair Hearings. The address appears on page 9 of this book.

11. YOUR RIGHT TO ASK FOR RESTRICTED PAYMENT FOR TEMPORARY ASSISTANCE

If you are applying for or are getting Temporary Assistance from the Family Assistance Program, you have the right to ask your local department of social services to **"restrict"** all or part of your Temporary Assistance grant to pay your bills such as heat, rent or utilities directly. To **"restrict"** your Temporary Assistance means that a part of your Temporary Assistance will be paid to someone else for you.

For example, if you ask your local department of social services to restrict your rent, your rent money will be sent right to your landlord every month instead of being given to you in your Temporary Assistance cash benefit. To ask that your Temporary Assistance be restricted, ask for a "Request For Voluntary Restricted Payments " form, fill it out and return it to your local department of social services.

You can stop a voluntary restriction by telling your local department of social services to do so in **writing**. The restriction must be stopped within 30 days of when the local department of social services gets your written request.

If you request that your grant be restricted to pay for your heat and/or domestic energy bills, your heating allowance and/or budget billing amount for your domestic energy will be restricted from your grant. At least once a year the local department of social services will compare your energy bill(s) to the amount(s) restricted from your grant. If the total amount billed is less than the amount restricted from your grant, the local department of social services may pay you the difference in cash. **If you are receiving non-cash Safety Net Assistance the difference will be added to your non-cash Safety Net Assistance debit account.** If the amount billed is more than the amount restricted from your grant, the difference will be recouped from your future Temporary Assistance grants.

Your local department of social services may refuse to restrict your payment when your Temporary Assistance grant is less than the bill you owe.

You can ask about restricted payments even if your Temporary Assistance does not come from the Family Assistance Program.

12. YOUR RIGHTS IF YOU ARE SUSPECTED OF FRAUD

If you find out that you are being investigated because your worker thinks you did not tell the truth about your case, you may want to talk to a lawyer. If you are charged with welfare fraud in criminal court, the court will, if you ask and are eligible, assign a lawyer to represent you at no cost.

13. YOUR RIGHT TO REGISTER TO VOTE

Any person who wishes to register to vote, regardless of whether they are applying for assistance, can obtain an application to register to vote and assistance in filling out that application at a government office accepting applications for benefits described in this book. That office will also accept a completed Voter Registration application and forward it to the local board of elections.

YOUR RESPONSIBILITIES

1. GENERAL RESPONSIBILITIES

If you are applying for, or getting Temporary Assistance, Medical Assistance, Food Stamp Benefits , Child Care benefits or other help, you must:

- Answer all questions completely and honestly. False answers may result in civil or criminal penalties.
- Be interviewed. If you miss an interview without telling your worker why, your application may be denied or your case may be closed. If you miss an interview and want to reschedule one, it is your responsibility to tell your worker. For Food Stamp Benefits, reschedule a missed interview before the 30th day after the date you applied to avoid losing Food Stamp Benefits. If you are applying only for child care benefits you can apply by mail. If your worker cannot determine your eligibility based on what you mailed in, you may be asked to come for an interview.
- Give your worker the papers and the information needed to find out if you can get help. If you cannot get these papers and information, your worker must try to help you.
- If you are able to work, and are applying for Temporary Assistance, you must accept any job offered to you that you are able to do, even if it would pay you less than Temporary Assistance does. Temporary Assistance will pay you a supplemental grant if you need it.
- If you are a non-legally responsible caretaker relative applying for Temporary Assistance for minor children and not receiving Temporary Assistance yourself, you must provide certain personal information that the federal government requires us to collect and report.
- If minor children applying for or receiving Temporary Assistance have non-applying or non-recipient brothers or sisters who are also minor children living in the same household, you must provide certain information on the non-recipient children that the federal government requires us to collect and report.

2. RESPONSIBILITY TO PROVIDE TRUTHFUL AND ACCURATE INFORMATION

When you are applying for or getting help, or when you are a non-legally responsible caretaker relative applying for or getting Temporary Assistance for minor children and not applying for or getting help yourself, you will be asked to provide proof of certain things such as those listed in **Your Responsibilities, Section 3 of this book, "Responsibility To Provide Proof".**

If you are applying for or getting Temporary Assistance or Food Stamp Benefits, and you or someone else in your case has been found guilty of lying about or concealing money, property or resources, you may lose your Temporary Assistance or Food Stamp Benefits. This is called an **Intentional Program Violation** (**IPV).**

If you are found to have committed an IPV by a court or a State Administrative Hearing, you will be "disqualified". This means that you cannot get Temporary Assistance or Food Stamp Benefits for a certain period of time. The length of time will depend on whether you get Temporary Assistance or Food Stamp Benefits and whether you have been found guilty of an IPV before and the monetary amount of the violation.

Besides losing your assistance, if you are found to have committed an IPV, you will have to pay back to social services the money or Food Stamps Benefits you should not have gotten.

You will either have to pay back the money or Food Stamp Benefits or when you begin to get your benefits again, they will be reduced until what you owe is paid back. If you live with other people and the other people continue to get benefits while you are disqualified, the other people might also get less benefits.

If you are disqualified from getting Temporary Assistance, your Food Stamp Benefits and Medical Assistance portions of your case will be looked at. Because of this, you could also be disqualified from getting Food Stamp Benefits and Medical Assistance.

If you are convicted in a federal or State court of having made a fraudulent statement or representation about your place of residence in order to receive Temporary Assistance or Food Stamp Benefits from two or more states at the same time you will be ineligible for ten years.

If you did not provide truthful and accurate information when applying or getting child care benefits, you will have to pay back any benefits that you were not eligible for. If you are convicted of fraud, additional penalties may apply.

INTENTIONAL PROGRAM VIOLATION (IPV) PENALTIES FOR TEMPORARY ASSISTANCE:

<u>If you have committed a Temporary Assistance IPV</u>, you will not be able to get Temporary Assistance as follows:

- 6 months Disqualification if this is
  - your first IPV, <u>and</u>
  - the IPV is less than $1,000
- 12 Months Disqualification if this is
  - your second IPV, <u>or</u>
  - the IPV is between $1,000 and $3,900
- 18 Months Disqualification if this is
  - your third IPV, <u>or</u>
  - the IPV is greater than $3,900
- 5 year Disqualification if this is your fourth or subsequent offense

Anyone who makes a false statement about who he/she is or where he/she resides in order to receive multiple Temporary Assistance benefits will not be able to get Temporary Assistance for ten years.

Anyone who is fleeing to avoid prosecution, custody or confinement for a felony, or who is violating a condition of probation or parole, is not eligible to receive Temporary Assistance.

INTENTIONAL PROGRAM VIOLATION (IPV) PENALTIES FOR FOOD STAMP PROGRAM:

<u>If you have committed a Food Stamp Benefits Program IPV,</u> you will not be able to get Food Stamp Benefits as follows:

- One year disqualification if this is
  - the first IPV
- Two years Disqualification if this is
  - the second IPV
- Permanent disqualification if this
  - is the third IPV.
- A court can also, in certain instances, bar an individual from receiving Food Stamp Benefits for an additional 18 months.

Anyone found guilty in a court of law of selling or getting **firearms, ammunition or explosives** in exchange for Food Stamp Benefits will never be able to get Food Stamp Benefits again.

Anyone found guilty in a court of law of buying or selling **controlled substances** (illegal drugs or certain drugs for which a doctor's prescription is required) in exchange for Food Stamp Benefits will not be able to get Food Stamp Benefits for 2 years for the first offense and permanently for the second offense.

Anyone found guilty in a court of law of trafficking in Food Stamp Benefits worth $500 or more will never be able to get Food Stamp Benefits again. Trafficking includes the illegal use, transfer, acquisition, alteration, or possession of Food Stamp Benefits, authorization cards, or access devices.

Anyone who makes a false statement about who he/she is or where he/she resides in order to receive multiple Food Stamp Benefits will not be able to get Food Stamp Benefits for ten years.

Anyone who is fleeing to avoid prosecution, custody or confinement for a felony, or who is violating a condition of probation or parole, is not eligible to receive Food Stamp Benefits.

3. RESPONSIBILITY TO PROVIDE PROOF

When you are applying for or getting help, you will be asked to provide proof of certain things such as those listed below. Your worker will tell you which of these things you **must** prove. Not all of these things are required for every program. You may have to prove some things for one program and not for another. If you bring proof with you when you first come in to apply for assistance, you may be able to get help sooner.

If you cannot get the proof you need, your worker will help you get that proof, if possible. If the local department of social services already has proof of the things that do not change, such as your Social Security Number, you do not need to prove them again.

WHAT YOU MAY BE ASKED TO PROVE	EXAMPLES OF HOW TO PROVE IT
• **Who you are**	Photo ID, driver 's license, U. S. passport
• **Age of each applying household member**	Birth or baptismal certificate, hospital records, driver's license
• **Where you live**	Current rent receipt, mortgage records, statement from non-relative landlord
• **Shelter Expenses**	Current rent receipt, current lease, mortgage records, property and school tax records, sewer and water bills, fuel bills, utility bills, telephone bills
• **Social Security Numbers**	Social Security Card or proof that you have applied for Social Security Numbers for everyone in your household who is applying for help
• **Citizen or Alien Status**	Birth certificate, U. S. passport, military service records, naturalization certificate, and Immigration and Naturalization Service documentation.

NOTE: ***For the Food Stamp Benefits Program*****,** citizenship must be documented only if questionable. Citizenship or Alien Status does not need to be proven for pregnant women applying for *medical assistance* only or for an undocumented alien applying for emergency medical assistance only.

NOTE: ***For Temporary Assistance and Food Stamp Benefits***, the local social services district must report the name and address and other identifying information known of any alien who has been determined by the Immigration and Naturalization Service or the Executive Office of Immigration Review, such as in a Final Order of Deportation, to be unlawfully in the United States. This information may be shared with the Immigration and Naturalization Services. This does not apply for Medical Assistance.

NOTE: ***For Child Care Benefits*****,** you must prove that any child who is receiving child care benefits is legally residing in the United States.

• **Whether you are Drug/Alcohol Dependent**	Alcohol/Drug screening assessment which may include a drug test. This does not apply to many Medical Assistance applicants.
• **Earned Income**	**C**urrent pay stubs, statement from employer, tax records, business records, statement from roomer or boarder of amount paid for lodging.
• **Unearned Income:**	
Examples of Unearned Income are:	*Examples of Proof of Unearned Income are:*
– **Child Support**	Statement from person paying support
– **Social Security Benefits**	Current benefit check or current award letter
– **Veteran 's Benefits**	Current benefit check, current award letter, official correspondence from Veteran 's Administration
– **Unemployment Insurance Benefits**	Official correspondence from New York State Department of Labor
– **Interest and Dividends**	Statement from bank, credit union or broker
– **Educational Grants and Loans**	Statement from school or bank current award letter
– **Worker 's Compensation**	Current award letter or check stubs
• **Resources**	
Examples of Resources are:	*Examples of Proof of Resources are:*
– **Bank Accounts**	Bank books or credit union records
– **Checking Accounts**	Bank statements
– **Burial Trust or Fund**	Bank statement or copy of funeral agreement
– **Burial Plot or Agreement**	Statement from cemetery, funeral director or church, copy of funeral agreement
– **Life Insurance**	Insurance Policy
– **Real Estate Other Than Where You Live**	Deed, appraisal/estimate of current value by real estate broker
– **Motor Vehicle**	Registration, title, financing information
– **Stocks and Bonds**	Stock certificates, bonds
• **School Attendance of Those Attending School**	School records, statement from school
• **Health Insurance**	Insurance policy, insurance card, statement from provider of coverage, Medicare card
• **Unpaid Rent or Utilities**	Copy of each bill, statement from landlord or utility company
• **Paid or Unpaid Medical Bills**	Copy of each bill and proof of payment if a paid bill
• **Non-custodial parent**	Death certificate, survivor 's benefits, divorce papers, Veteran's Assistance or military records.
• **Disabled/Incapacitated/ Pregnant**	Statement from medical professional, proof of Social Security Disability or Supplemental Security Income (SSI) benefits
• **Other Expenses/Dependent Care Expenses**	Cancelled checks or receipts, statement from child care provider, court order, statement from aide or attendant

If you are applying for **Services only**, you do **not** have to provide proof of the following items:

- **Shelter Expenses**
- **Social Security Numbers**
- **Resources**
- **Unpaid Rent or Utilities**
- **Health Insurance**
- **Paid or Unpaid Medical Bills**
- **Other/Dependent Care Expenses**

If you are applying for **Medical Assistance only**, pregnant women and children under the age of one do not have to provide proof of their resources. Generally, children up to the age of nineteen do not have to provide proof of resources.

4. RESPONSIBILITY TO ENROLL IN THE AUTOMATED FINGER IMAGING SYSTEM (AFIS)

If you are applying for or receiving regular or emergency Temporary Assistance or Food Stamp Benefits, you must enroll in the Automated Finger Imaging System (AFIS) if you are an adult (18 years of age or older) or if you are the head of household. For the Medical Assistance program, only those applicant/recipients whose Medical Assistance identification card must contain a photo image are required to enroll in AFIS.

5. RESPONSIBILITY TO REPORT CHANGES

General Information On Changes

If your situation changes in any way while you are waiting to hear about your Application, you should let your worker know as soon as possible.

Once you are getting money or other help, you must let your worker know about changes within 10 days unless:

- You are receiving Temporary Assistance for a child and you know that the child will be absent from for home for 45 days or more. You must report that change within 5 days, or
- You are receiving child care benefits. If you are receiving child care benefits you must report any changes that could affect you child care benefits immediately.
- Are only getting Food Stamp Benefits **and**
    - You are working and you have already told your worker how much money you earned and
    - The local department of social services has told you that you only have to report changes every six months (six-month reporter). However, if you are a six-month reporter and your total gross income is more than 130% of the poverty level during the month, you must tell your worker within 10 days of the end of that month. You worker will explain what 130 % of the poverty level means for a family of your size. Unless your income goes over 130% of poverty, you do not need to report changes at any time other than at Recertification or, if you recertify every 12 months, on a six-month report. However, you may voluntarily report other changes, such as a rent increase, at any time.
- Are required to fill out and send in Quarterly Reports

If you are only receiving Food Stamp Benefits and have not been informed that you are a six-month reporter, you must report right away (within 10 days):

- when you get new income or change jobs
- your monthly earned or unearned income goes up by more than $100.00
- someone joins or leaves your household
- you move or your rent changes
- your resources go over your resource limit, or
- your deductible medical expenses change by more than $25.00 a month

Whenever you report a change, we must see how it affects your eligibility. Sometimes a change, such as having a baby or your rent going up, may mean that you will get more money or other help. However, a change, such as someone permanently leaving your home, starting a new job or getting more income, may mean that you will get less help.

If you are getting Temporary Assistance, Food Stamp Benefits or Medical Assistance and are **not** required to file Quarterly Reports and are not a Food Stamp six-month reporter, you must tell your worker about changes **right away** (within 10 days) and give your worker proof of the change (such as a pay stub, award letter, landlord statement). If you **do not** report a change, such as more income, and this means that you get too much money or other help, you may have to pay it back.

There could also be legal action taken against you. Also, you may not be able to get Temporary Assistance or Food Stamp Benefits for a certain amount of time.

If you are getting Food Stamp Benefits and if you are elderly and disabled, you do not need to report changes to medical expenses at any time other than recertification. However, you may choose to report changes to medical expenses at any time. If you do, we must immediately take appropriate action, including increasing your Food Stamp Benefits if the change requires an increase and if proof is provided.

The following are examples of the types of changes you must report **right away:**

- You get a job or you lose a job or the hours that you work change.
- The number of people in your household changes. For example:
    - A non-custodial parent returns.
    - A child leaves home or comes back.
- You are pregnant, or you just had a baby.
- Your income changes.

- You start or stop getting other income, such as:
  - Social Security (RSDI) or Supplemental Security Income (SSI)
  - Child support, alimony or any money from a non-custodial parent or spouse
  - Unemployment Insurance Benefits (UIB)
  - Pensions or retirement benefits
  - Worker's Compensation or an accident settlement
  - Money from a roomer, boarder, or from renting a house or an apartment to another person
  - Tax refunds
  - Earned Income Tax Credit (EITC) (Food Stamp Benefits Only)
  - Any other money you get, from working or from other ways.
- Your address changes, the amount of your rent changes or you start getting more help to pay for your housing, such as a subsidy from the government.
- A child age 18 leaves school.
- A child age 16 or older in your home leaves school **and** gets a job.
- A parent in the home goes into the hospital, gets sick, gets hurt or has a condition, which affects that parent being able to work or to take care of the children.
- You learn any new information about a non-custodial parent, such as where the parent is.
- You get married, separated or divorced.
- You or other family members get health insurance, even if someone else pays for the insurance. (If you are applying for Food Stamp Benefits only, you do not have to report this.)
- You or someone who lives with you receives property.
- You or someone who lives with you transfers any property or money.
- You or someone who lives with you gets hurt in an accident, gets medical treatment paid for by Medical Assistance and is suing the person who caused the accident.
- A child will be out of the home for 45 or more consecutive days (you must notify us within 5 days of when you know the child will be absent.)
- A child returns to the home.
- You change your child care provider or child care arrangements

Requirement To Report A Lump Sum Payment

A lump sum payment is a one-time payment, such as an insurance settlement, inheritance or lottery winning. If you or any member of your household gets or expects to get a lump sum payment, you must tell your worker **right away**. If you get a lump sum payment, and you are getting Temporary Assistance, your grant may be affected as follows.

1) If you get a lump sum payment, which is **less than** your monthly Temporary Assistance limit, this lump sum payment will be counted as income for the month in which you get it.

2) If you get a lump sum payment, which is **more than** your monthly Temporary Assistance limit, you must do one of the following:
   - **TURN OVER** the lump sum payment to the local department of social services to pay back the money and help you got in the past.
   - If the lump sum payment is less than the amount of the assistance that was paid to you in the past, your case may stay open.
   - If the lump sum payment is more than the amount of the assistance that was paid to you in the past, the rules in the **"Keep"** section below apply.

KEEP the lump payment sum or the balance of the lump sum payment. Your Temporary Assistance case will then be closed for a certain amount of time. The length of time for which your case will be closed depends on how much the lump sum payment is, and how much your Temporary Assistance limit is.

EXAMPLE: If you get $5,000 in a lump sum, and your monthly Temporary Assistance limit is $500, your household cannot get Temporary Assistance for 10 months ($5,000 divided by $500 =10 months).

Be sure to look at the "**Exceptions**" below.

NOTE:	If you are receiving child care benefits, some lump sum payments will impact your child care eligibility or the amount of your child care benefits. You must tell your worker about any lump sum payments immediately.

EXCEPTIONS

You and anyone who is in your case during the month in which you got the lump sum will not be able to get Temporary Assistance for a certain amount of time, even if the lump sum payment was spent, **unless** one of the following shortens that amount of time:

- Something happens which would make your Temporary Assistance go up if you were still getting Temporary Assistance.
- For example, your rent goes up or you have a special need such as pregnancy. ***or***
- Some or all of the lump sum payment was used for a reason that you could not help. Some examples are: your family is faced with an emergency, you have unusually high household expenses such as fuel or shelter or the money is stolen. ***or***
- During the time you are ineligible for Temporary Assistance, a family member gets and pays for medical care that would be covered under the Medical Assistance Program.

If your local department of social services finds out that you have countable property or that you may be getting a lump sum payment, they may place a lien against that property or the lump sum payment. This means that before you get any money from the property or lump sum payment, your local department of social services may take the amount of Temporary Assistance you, your spouse and child(ren), including stepchildren, have gotten. Liens may also be placed on personal injury settlements and any real property that you own. Real property includes the home you own and live in, as well as other real estate you may own.

6. RESPONSIBILITIES REGARDING YOUR COMMON BENEFIT IDENTIFICATION CARD

To access Temporary Assistance cash or Food Stamp Benefits you will need your Common Benefit Identification Card (CBIC) and Personal Identification Number (PIN). Your CBIC and your PIN will act as your signature when you access your benefits.

You will be held responsible for Cash and Food Stamp Benefits that are accessed using your CBIC card and PIN. If someone else uses your Common Benefit Identification Card (CBIC) and PIN to access your account, no replacement of benefits will be issued even if you claim that you did not receive those benefits.

It is your responsibility to keep your Personal Identification Number (PIN) secret. You should not tell your PIN to anyone, or write it on your CBIC card.

If your Common Benefit Identification Card (CBIC) is lost, stolen or damaged call Customer Service at 1-888-328-6399. To get your card replaced you must call your eligibility worker. Misuse or abuse of your card, such as selling it may result in an investigation by State and/or Federal authorities. Documented violations will result in sanctions including:

- Disqualification from Program
- Recovery through recoupment/restitution; and/or
- Prosecution

If you have forgotten your Personal Identification Number (PIN) you may call Customer Service at 1-888-328-6399. You may also select a new PIN at your local department of social services office or request that your worker mail a new PIN to you.

You will also need to show your CBIC card to access Medical Assistance services.

7. RESPONSIBILITY TO ACCESS YOUR FOOD STAMP BENEFITS

If you are receiving Food Stamp Benefits with Electronic Benefit Transfer (EBT):

If you are approved to get Food Stamp Benefits, your benefits will be transferred into your Food Stamp Benefits Account on the same date each month. Once available, a Food Stamp Benefit must be used within 270 days from the date it became available. A Food Stamp Benefit that you do not use within 270 days of the date it became available cannot be replaced.

8. RESPONSIBILITY TO REPAY BENEFIT OVERPAYMENTS

For Temporary Assistance:

If you get more Temporary Assistance than you should have (overpayment), you must pay it back. If your case is active, we will take back the amount of the overpayment from future Temporary Assistance benefits that you get. If you Temporary Assistance case is closed, the local department of social services will contact you about repayment of the amount you owe.

For Food Stamp Benefits:

If you get more Food Stamp Benefits than you should have (overpayment), you must pay them back. If your case is active, we will take back the amount of the overpayment from future Food Stamp Benefits that you get. If your case is closed, you may pay back the overpayment through any unused Food Stamp Benefits remaining in your account or in cash. If you are late in your payment, the overpayment will be subject to collection in a number of ways, including automated collection by the federal government. Federal benefits such as Social Security or cash in the form of tax refunds that you are entitled to receive may be taken to pay back the overpayment and processing charges. This process is known as the Treasury Offset Program (TOP).

9. EMPLOYMENT RESPONSIBILITIES

For Temporary Assistance

As an applicant for or recipient of Temporary Assistance you must:

- Continually look for a job even if you are not assigned to do so and be prepared to provide evidence that you have been looking for a job. If you need child care in order to look for a job, you must tell your worker.
- Take a job when one is available.
- Participate in an assessment of your ability to work and participate in work activity assignments.
- Unless you are determined to be exempt from work activities, you must participate in work activities as assigned by the social services district. You may also be required to get a medical examination or medical statement to participate in a work activity assignment or to verify that you have a medical condition that prevents you from working.
- If you are determined to be exempt from participation in work activities, you may be required to accept medical care or other employment services to restore your ability to work. You may also be required to attend a meeting with the social services district and provide evidence to determine whether or not you continue to be exempt from work requirements.

If you do not comply with the above listed requirements, you or your household may be denied Temporary Assistance or have your household's Temporary Assistance benefits reduced.

You are considered able to work and must participate in work activities unless you are determined by the social services official to be:

(1) disabled, incapacitated, ill or injured to the extent that you are unable to engage in work activities;
(2) younger than sixteen years of age or sixty years of age or older;
(3) under the age of nineteen and attending full time a secondary, vocational or technical school;
(4) needed in the home to care for an ill, incapacitated or disabled household member and you are the only one who can reasonably provide such care;
(5) pregnant and expected to deliver your child within thirty days;
(6) needed in the home to care for a child under twelve months of age. This exemption shall last no longer than three months after a child is born unless the social services official makes a determination to extend the exemption for up to a maximum of twelve months over your lifetime.
(7) unable to participate due to a lack of child care.

Sanctions for Failure to Comply with a Temporary Assistance Work Assignment

If you are not exempt from participation in work activities and do not comply with the above requirements, you or your household may be denied Temporary Assistance or have your households Temporary Assistance benefits reduced. The length of time the benefits will be reduced depends on whether or not your household contains a dependent child and the number of times you have failed to comply.

For a household with dependent children, the household grant will be reduced as follows:

- the first failure to comply – until you comply
- the second failure to comply – at least three months and until you comply
- the third failure and subsequent failures to comply – at least six months and until you comply

For a household without dependent children, the household grant will be reduced as follows:

- the first failure to comply – at least 90 days and until you comply
- the second failure to comply – at least 150 days and until you comply
- the third and subsequent failures to comply – at least 180 days and until you comply

If a social services official determines that you have intentionally misrepresented that you suffer from an impairment that would limit your ability to participate in work activities, your Temporary Assistance grant may be reduced for a period of time. If you are sanctioned for this reason, the sanction also will continue until you are willing to comply with employment requirements and no longer intentionally misrepresent that you suffer from an impairment. (The fact that medical evidence does not support your claim of an impairment does not in itself indicate that you will be sanctioned.)

For Food Stamp Benefits

Unless you are exempt from work registration requirements as an applicant for or recipient of Food Stamp Benefits you must:

- Accept a job or a referral to an actual or potential job opening;
- Participate in an assessment of your ability to work;
- Provide information regarding your employment status and availability for work;
- Participate in work activity assignments.

If you do not comply with the above listed requirements, you may lose your Food Stamp Benefits.

You are deemed to be a work registrant and required to comply with work registration requirements unless you are determined by the social services official to be:

(1) younger than 16 years of age or 60 years of age or older;
(2) mentally or physically disabled, incapacitated, ill or injured to the extent that you are unable to engage in work activities;
(3) subject to and complying with a federally funded (TANF) Temporary Assistance work requirements. If you are assigned to TANF work experience, this exemption from Food Stamp Benefits work requirements does not apply;
(4) responsible for the care of a dependent child under the age of six. If you are participating in TANF work experience, this exemption from food stamp work requirements does not apply;
(5) responsible for the care of an incapacitated person;
(6) an applicant for or recipient of Unemployment Insurance Benefits who is required to register for work as part of the unemployment compensation process;
(7) a regular participant in a drug or alcohol treatment and rehabilitation program and the social services official determines that you are either unable to work or that assignment to work activities is impractical;
(8) employed or self employed and working a minimum of 30 hours weekly or receiving weekly earnings at least equal to the federal minimum wage multiplied by 30 hours;
(9) a student enrolled at least half-time in a recognized school, training program or institution of higher education;
(10) an applicant for Supplemental Security Income (SSI) and Food Stamp Benefits under the joint processing provisions until you are either determined to be eligible for Supplemental Security Income (SSI) and, thereby, exempt from work registration, or determined to be ineligible for Supplemental Security Income (SSI); or
(11) 16 or 17 years old and attending school or an employment training program at least half-time.

Sanctions for Failure to Comply with a Food Stamp Work Assignment

If you are not exempt from participation in work activities and do not comply with the above requirements, you may lose your food stamp benefits. The length of time you will lose your benefits depends on the number of times you have failed to comply.

- The first failure to comply – at least two months and until you comply
- The second failure to comply within a three year period – at least four months and until you comply
- The third and subsequent failures to comply within a three year period – at least six months and until you comply

Additional Requirements for Food Stamp Benefits Recipients who are Able-Bodied Adults without Dependents (ABAWDs)

If you are a work registrant, you may also be required to meet additional Food Stamp Benefits eligibility requirements unless you are:

(1) under 18 years of age or 50 years of age or older;
(2) pregnant;
(3) any adult (including a parent) residing in a household where a member is under 18 years of age.

If you are a work registrant and not exempt based on one of the above three reasons, you will only be eligible to receive Food Stamp Benefits for three months in every 36 months unless you are:

- working for at least the minimum wage at least 80 hours a month; or
- participating in a work program approved by the social services district for at least 80 hours a month; or
- fully complying with a work experience assignment.

If you lose your eligibility for Food Stamp Benefits because you did not meet the above requirement for three or more months during which you received Food Stamp Benefits, you may begin to again receive Food Stamp Benefits, if otherwise eligible, after you have met the requirement for a 30-day period. You would then be required to continue to work or participate in a work program to continue to receive Food Stamp Benefits.

After you reestablish your eligibility for Food Stamp Benefits by working or participating in a program, if you lose your job or are unable to participate in your assigned program, you may be eligible to receive Food Stamp Benefits for up to an additional three months in the same 36-month period without working or participating in a work program.

For Medical Assistance

There are no employment requirements for Medical Assistance applicants/recipients.

10. RESPONSIBILITIES REGARDING CHILD CARE

If you are receiving Temporary Assistance and need child care in order to participate in work activities, please read the following. It will tell you about your **responsibilities** regarding child care.

It is your responsibility to **look for and choose** a child care provider.

If you are unable to find a child care provider**, you must do the following:**

1. **Let your worker know** what you have done to find a provider and **ask for help** in finding a provider.
2. **Follow up on all referrals** you are given by your worker or other programs that are helping you locate a provider. This means **you must contact or visit all providers that you are referred to** until you are able to choose a provider that is appropriate, accessible, suitable and affordable.
3. If you have contacted all providers and are still not able to choose any of these providers, **you must let your worker know in writing which providers you contacted and when and why you did not choose any of these providers**. Your reasons must include one of the following:
   - The provider was not open for the days or hours needed or could not care for your child's special needs.
   - You were unable to get to the provider by car or public transportation.
   - The provider was not located within a reasonable distance from your home or work activity. Each social services district has a different meaning of "reasonable distance". The district must tell you what reasonable distance means in your district.
   - Friends, relatives or neighbors you considered or contacted were unsuitable.
4. If you show that you are unable to locate a provider, your worker **must offer you a choice of two providers**. At least one of these choices must be a child care provider who is licensed or registered with the State of New York or New York City Department of Health. You must choose one of these providers or show why they are not appropriate, accessible, affordable or suitable.
5. **You must continue to look** for a child care provider and follow up on all referrals during the time you are excused from your work activity.
6. If you cannot show that you were unable to locate a provider and that the two choices of providers offered to you were not appropriate, accessible, affordable, or suitable, then your Temporary Assistance cash grant will be reduced if you fail to participate in your work activity.

11. RESPONSIBILITIES REGARDING CHILD AND SPOUSAL SUPPORT

As a Temporary Assistance or federally funded Safety Net Assistance applicant or recipient or a recipient transitioning from temporary assistance who is receiving child care, you must cooperate with your local department of social services in establishing paternity and collecting support as follows:

SUPPORT COLLECTION – TEMPORARY ASSISTANCE

When you sign an Application for Temporary Assistance and for as long as you get Temporary Assistance, you turn over to your local department of social services your right to get any support payments owed to you or anyone else for whom you are applying or getting Temporary Assistance.

This means that as long as you get Temporary Assistance, the local department of social services has the right to get current support and past due support **(arrears)**.

Even if you are getting support paid directly to you without a support or paternity order, you must turn over that money to the local department of social services.

Any collections made will be used to pay for Temporary Assistance for you and your children, except for the "pass- through" payment. **(See Your Rights, Section 10 of this Book, "Support Pass-Through Payments – Temporary Assistance").**

Even after your Temporary Assistance case closes, the local department of social services will sometimes have the right to get the past due support **(arrears)**. This also means that the local department of social services will take legal action to collect these

payments.

As a **Temporary Assistance** applicant or recipient, you must cooperate with the Child Support Enforcement Unit of your local department of social services **unless** you have a good reason not to. If you feel you have a good reason for not cooperating **("good cause claim")**, you must tell your local department of social services.

Your local department of social services will allow your "**good cause claim**" if:

- Your cooperation with the Child Support Enforcement Unit is likely to cause physical or emotional harm to you or your children
- Your child came from a pregnancy due to incest or rape
- You are working with an authorized adoption agency to have your child adopted

You will be asked to give as much information and/or documentation as possible about your ex-spouse, or the parent of the child, such as that person's Social Security Number, date of birth, address, employer's name and address and any court information related to paternity or support actions. This information will be used to:

- Establish paternity of each child born out of wedlock
- Get child support from the non-custodial parent of each child until each child is 21 years old
- Arrange to have your support payments turned over to the Support Collections Unit of the local department of social services.

You will also be required to appear, as necessary, at the child support office to provide information or documentation and at any court proceeding.

If you do not cooperate with the Child Support Enforcement Unit, without "**good cause**", your Temporary Assistance grant will be reduced by 25% for each incidence of non-compliance, and any Temporary Assistance for your children may be paid to another person, called a "**protective payee**".

If you do not agree with any of the actions of your local department of social services, you may ask for a Conference or a Fair Hearing, **(See Your Rights, Section 5 of this Book, Conferences, Support Pass-through Payment Desk Reviews and Fair Hearings")**.

CHILD SUPPORT COOPERATION - MEDICAL ASSISTANCE

When you want to get Medical Assistance for yourself and you are also applying for your child under 21, and the child 's other parent is not living with the child or will not help with the child 's medical bills, you must cooperate with the Child Support Enforcement Unit of your local department of social services. This is not required if you are pregnant, or it is within two months following the month of the end of your pregnancy or you are only applying for the child. You are required to cooperate with the Child Support Enforcement Unit to try to get help from the non-custodial parent to pay for your child's medical bills, and, if your child is born out of wedlock, to establish paternity.

You are required to pursue medical support only. You are not required to pursue or assign your rights to cash support from a non-custodial parent to the local department of social services. If you are applying for Medical Assistance for your child, your child's eligibility will not be affected if you do not cooperate in establishing paternity.

You must turn over your right to collect money for medical bills or health insurance to your local department of social services. You must also cooperate with the department to get health insurance and money for medical bills from people legally responsible for you and your children.

As a Medical Assistance applicant or recipient, you must cooperate with the Child Support Enforcement Unit **unless** you have a good reason not to. If you feel you have a good reason for not cooperating **("good cause claim")** you must tell your local department of social services. Your local department of social services will allow your "**good cause claim**" if:

- Your cooperation with the Child Support Enforcement Unit is likely to cause physical or emotional harm to you or your children
- Your child came from a pregnancy due to incest or rape
- You are working with an authorized adoption agency to have your child adopted.

You will be asked to give as much information and/or documentation as possible about the parent of the child, such as the parent's social security number, date of birth, address, employer 's name and address and any court information related to paternity or support actions.

This information will be used to:

- Establish paternity of each child born out of wedlock for whom you are applying for or getting Medical Assistance, when the child is at least two months old.
- Get health insurance and money for medical bills from the non-custodial parent of each child until each child is 21 years old.

You will also be required to appear, as necessary, at the child support office to provide information or documentation and at any court proceeding.

If you do not cooperate with the Child Support Enforcement Unit, you cannot get Medical Assistance for yourself, unless you have "good cause " for not cooperating or you are pregnant or it is within two months following the end of your pregnancy.

$50.00 CHILD SUPPORT DISREGARD - MEDICAL ASSISTANCE

The first $50.00 of current child support collected each month is not counted when the local department of social services decides if you can get Medical Assistance.

SUPPORT YOURSELF

You are required to cooperate in pursuing medical support from an absent spouse or, where applicable, an ex-spouse. You are required to tell us if a spouse or ex-spouse, is, or may be, required to help pay for your medical bills or provide you with health insurance coverage. You must do so unless you have good cause not to cooperate.

If you do not agree with any of the actions of your local department of social services, you may ask for a Conference or a Fair Hearing (See Your Rights, Section 5 of this Book, "Conferences, Support Pass-Through Payment Desk Reviews and Fair Hearings").

12. RESPONSIBILITY TO COMPLETE THE ALCOHOL AND SUBSTANCE ABUSE SCREENING FOR TEMPORARY ASSISTANCE

All adult and head of household applicants for and recipients of Temporary Assistance must complete the Alcoholism and Substance Abuse Screening Questionnaire. After completing the Questionnaire, you may be required to go to a certified substance abuse counselor for a formal assessment to determine whether or not you have an alcohol or substance abuse problem. After completing the assessment the local district will determine what treatment, if any, will be required. If it is determined that a treatment program is required, you must sign a consent form for disclosure of treatment information and must provide periodic proof of your treatment progress to your local department of social services.

If you fail to participate in the screening or assessment process or fail to sign the consent form to release information from the treatment program, your Temporary Assistance grant will be reduced. The Safety Net Assistance program will provide benefits to all otherwise eligible household members.

If you fail to:

- participate or complete the required treatment;
- document treatment compliance; or
- attend the treatment program that the social services district determines appropriate for you.

You may be sanctioned from receiving Temporary Assistance. Additionally, if you leave a residential treatment program prior to completion, you may not get any personal needs allowance (PNA) which accumulates while you were in the treatment program.

13. RESPONSIBILITY TO PARTICIPATE IN SUBSTANCE ABUSE REHABILITATION FOR MEDICAL ASSISTANCE

Certain Medical Assistance applicants and recipients are required to comply with the alcohol and substance abuse screening, assessment and treatment requirements. Applicants for or recipients of Medical Assistance must meet these alcohol and substance abuse requirements **if they are** between 21 and 65 years of age, not pregnant, not certified blind or disabled; and a husband/boyfriend of a pregnant woman with no other children in the household; or a stepparent with no children of his/her own in the household when the birth parent is also in the household; or a single individual; or a childless couple.

14. RESPONSIBILITIES REGARDING THE USE OF MEDICAL ASSISTANCE PROVIDERS

Before you get medical care, you must make sure that the doctor, pharmacist or other person you want help from agrees to bill Medical Assistance. Not all medical providers accept Medical Assistance. If you need medical care after you apply for Medical Assistance but before you get your Common Benefit Identification Card (CBIC), you must still make sure the provider accepts Medical Assistance. If you have to pay a bill, after you apply for Medical Assistance but before you get your Common Benefit Identification Card (CBIC), we can only pay the bill if you are determined eligible for Medical Assistance. We can pay you **only** if the provider accepts Medical Assistance.

When you are approved for Medical Assistance, you may be able to join a Medical Assistance health plan. If you have a doctor you want to keep seeing, you need to check to see if he or she is in the Medical Assistance health plan you join. When you join a

health plan, you will get a health insurance card from your plan.

You must use your Common Benefit Identification Card (CBIC) to access your Medical Assistance Benefits. It is important to use your Common Benefit Identification Card (CBIC) in a responsible manner when using it for the purpose of obtaining medical benefits. If you abuse Medical Assistance, you will be placed in the **Recipient Restriction Program (RRP).** This program limits the range of Medical Assistance providers from which you receive medical care, unless you have an emergency. A Medical Assistance provider is a person or facility that gives medical care. Some reasons why you might be restricted in your choice of Medical Assistance providers are:

- You are getting care from several doctors for the same problem.
- You are getting medical care more often than needed
- You are using prescription medicine in a way that may be dangerous to your health.

If you are in the **Recipient Restriction Program**, you may ask to change your single Medical Assistance provider every three months or sooner if there is a good reason.

Some good reasons are:

- You or your Medical Assistance provider moves, and it is hard to get to your provider.
- Your Medical Assistance provider no longer accepts Medical Assistance.
- Your Medical Assistance provider does not want to see you.

The first time you abuse Medical Assistance, you will be assigned to one Medical Assistance provider for two years.

If the abuse happens again, you will be restricted for a new 3-year period. If you abuse Medical Assistance again, you will be restricted for six years.

15. RECERTIFICATION RESPONSIBILITIES

Federal and State regulations require that your case be reviewed to see if you are getting all the help you should be getting. This review is called Recertification. Usually, this means you will fill out a Recertification form and/or questionnaire and will be interviewed at least once a year.

You will be asked many of the same questions to determine if your circumstances have changed. If you have any questions or have trouble filling out any of the forms, ask for help.

If you miss an interview without telling your worker why, your case may be closed. Therefore, you must make sure to tell your worker the reason. If you have a good reason, your case will not be closed. An example of a good reason would be being ill on the day of the interview. <u>You must meet all recertification requirements in order to keep getting help.</u>

16. MINOR PARENTS RESPONSIBILITIES APPLYING FOR OR GETTING TEMPORARY ASSISTANCE

If you are under 18 and you are a parent who is not married and who is caring for a child and have no children under twelve weeks of age, you must be working toward a high school diploma or its equivalent (if you have not completed high school), or participating in an alternative educational program approved by your worker.

If you are pregnant and under 18 or are a parent who is under 18 and not married, you must live with a parent, legal guardian, or other relative. If your worker determines that this is not possible or not in your child's best interest, the local district will decide if your current living arrangement is appropriate. If it is not, the local district will assist you in finding other appropriate living arrangements.

These rules do not apply to Medical Assistance.

17. YOUR RESPONSIBILITIES REGARDING TEMPORARY HOUSING IF YOU ARE HOMELESS

If you need Temporary Housing Assistance because you are homeless, it is very important that you read this!

You might not get Temporary Housing Assistance if you do not follow some important rules.

Sometimes when you lose Temporary Housing Assistance because you do not follow the rules, you may be able to get that help again right away if you will follow the rules.

Other times, when you lose Temporary Housing Assistance you cannot get Temporary Housing Assistance again for 30 days, even if you agree to follow the rules. The amount of time that you lose eligibility for Temporary Housing Assistance will depend on which rule you violate.

Some of the rules that you will have to follow in order to prevent losing Temporary Housing Assistance help are listed below.

1. You must help social services staff to find out if you are eligible for emergency housing assistance.
2. You may be required to meet with social services staff or a person appointed by social services to help develop an independent Living Plan for you. If an Independent Living Plan is developed for you, you will receive a copy of the plan. The independent Living Plan will tell you about the rules that you must follow.
3. You must actively look for permanent housing and you must not unreasonably refuse permanent housing that is offered by social services staff.
4. You must behave in a manner that does not interfere with the orderly operation of the Temporary Housing Facility where you are staying. You must not commit acts, which endanger anybody's health or safety.

It is important for you to know that if you fail to follow the rules you might lose eligibility for Temporary Housing Assistance for a period of time! In addition, if you have children, your children will also have to leave the temporary housing facility unless there is another eligible caretaker in the facility for the children.

18. RESPONSIBILITY TO APPLY FOR SUPPLEMENTAL SECURITY INCOME- SSI

If you have a medical condition that prevents you from working, you **may** be required to file for Supplemental Security Income - SSI.

If you have a physical or mental medical condition or conditions that is or are so bad that it prevents you from working, you must report this information to your worker. If your worker agrees that your medical condition may be preventing you form working, your worker will **require** you to apply for Supplemental Security Income - SSI at the Social Security Administration.

This means that:

- You must apply for Supplemental Security Income-SSI,
- You must cooperate with all the requirements for Supplemental Security Income-SSI,
- If your Supplemental Security Income - SSI application is denied, you must appeal this denial unless your worker tells you that you don't have to file an appeal.

If you fail to meet these requirements, you will not be eligible for Temporary Assistance.